

OCT 04 2002
PATENTS & TRADEMARKS OFFICE

AMENDMENT TRANSMITTAL LETTER			DOCKET NUMBER: P-LJ 4575
SERIAL NO: 09/765,086	FILING DATE: January 17, 2001	EXAMINER: M. Yu	GROUP ART UNIT: 1642
INVENTION: CHIMERIC PROSTATE-HOMING PEPTIDES WITH PRO-APOPTOTIC ACTIVITY			RECEIVED

OCT 10 2002
TECH CENTER 1600/2900

TO COMMISSIONER FOR PATENTS

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE
"EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER
37 C.F.R. 1.10 ON THE DATE INDICATED ABOVE, AND IS
ADDRESSED TO: COMMISSIONER FOR PATENTS WASHINGTON,
D.C. 20231.

Mary Begolla
(TYPED OR PRINTED NAME OR PERSON MAILING PAPER OR FEE)

Mary Begolla
(SIGNATURE OF PERSON MAILING PAPER OR FEE)

Transmitted herewith is Response to Office Action mailed
May 23, 2002, with attached Appendix A, and Exhibits A and B, in
the above-identified application.

- Small Entity status of this application has been established under 37 CFR 1.27.
- Petition for Two-Month Extension of Time is enclosed (in duplicate).
- Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- No additional claims fee is required.
- An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMEND- MENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER OF EXTRA CLAIMS PRESENTED	RATE		FEE	
				SMALL ENTITY	OTHER ENTITY	SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	17	-	22	-	0	x \$9	\$18
INDEPENDENT CLAIMS	3	-	3	-	0	x \$42	\$84
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		YES	X NO		\$140	\$280	= \$
					TOTAL ADDITIONAL FEE		\$

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventors: Ruoslahti et al.

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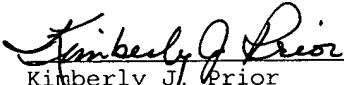
Please charge my Deposit Account No. 03-0370 the amount of \$ _____. A duplicate copy of this sheet is enclosed.

A check in the amount of \$200.00 is enclosed for a two-month extension of time.

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 03-0370. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge to Deposit Account No. 03-0370 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



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